

## Application Data Sheet

### **Application Information**

Application number::  
Filing Date:: 06/23/03  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: POWER CHIP SCALE PACKAGE  
Attorney Docket Number:: 018865-005910US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 3  
Small Entity?:: No  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Philippines  
Status:: Full Capacity  
Given Name:: Maria Cristina  
Middle Name:: B.  
Family Name:: Estacio  
Name Suffix::  
City of Residence:: Cebu City  
State or Province of Residence::  
Country of Residence:: Philippines  
Street of Mailing Address:: Phase II B, BLKS 5, Lot 22  
Postal Address Line Two:: Villa Leyson, Talamban  
City of Mailing Address:: Cebu City  
State or Province of mailing address::  
Country of mailing address:: Philippines  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Philippines  
Status:: Full Capacity  
Given Name:: Ruben  
Middle Name::  
Family Name:: Madrid  
Name Suffix::  
City of Residence:: Cebu City  
State or Province of Residence::  
Country of Residence:: Philippines  
Street of Mailing Address:: Phase II B, BLKS 5, Lot 22  
Postal Address Line Two:: Villa Leyson, Talamban  
City of Mailing Address:: Cebu City  
State or Province of mailing address::  
Country of mailing address:: Philippines  
Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Designation:: Primary	Representative Number:: 37,495	Representative Name:: Babak S. Sani
Associate	35,933	Kevin T. LeMond

### **Domestic Priority Information**

Application:: This Application	Continuity Type:: Divisional of	Parent Application:: 09/858,811	Parent Filing Date:: 05/15/01
--------------------------------	---------------------------------	---------------------------------	-------------------------------

**Foreign Priority Information**

Country:: Application number:: Filing Date::

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::